

Treatments for Borderline Personality Disorder Nomination Summary Document

Results of Topic Selection Process & Next Steps

While a systematic review on this topic is feasible, *Treatments for Borderline Personality Disorder*, will not go forward for refinement as a systematic review due to programmatic resource constraints

Topic Description

Nominator(s): Health care professional association

Nomination Summary:

The nominator asserts that an up-to-date review of the available evidence on treatments for borderline personality disorder (BPD) is needed. An evidence review of this topic may inform the development of new clinical guidelines on use of pharmacological and non-pharmacological treatment options (e.g., psychotherapy, electroconvulsive therapy) for BPD.

Population(s): Individuals with borderline personality disorder

Intervention(s): Pharmacological, non-pharmacological treatments (e.g., psychotherapy, electroconvulsive therapy), and combination treatment **Comparator(s):** Those listed above (i.e., compared to each other)

Outcome(s): Improved social and occupational functioning as well as improved health related quality of life. Decreased reckless and aggressive behavior, self-harm (including

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suicide attempts), remission, treatment harms, and unstable mood.

Key Questions from Nominator: What is the efficacy and comparative effectiveness of pharmacological and nonpharmacological treatments for adults with borderline personality disorder?

Considerations

- Borderline personality disorder (BPD) is a serious mental illness characterized by unstable moods, behaviors, and relationships. Individuals with BPD have impaired social, occupational, and role functioning and experience extreme reactions, distorted self-image, and intense anger. BPD is also associated with high rates of self-destructive behavior including suicide attempts and completed suicides. Common comorbid conditions include depression, anxiety, and substance abuse.
- Psychotherapy is usually the primary recommended treatment for BPD. There are no medications that carry a Food and Drug Administration (FDA) approved indication of treatment for BPD. However, medications are prescribed to treat the symptoms of BPD and comorbid conditions, including atypical antipsychotics and antidepressants. BPD may also be treated with other non-pharmacological treatment such as electroconvulsive therapy (ECT).

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- Patients and providers may be uncertain about which of these treatment options are most effective as treatment varies based on disease severity, patient history (e.g., co-occurring disorders, treatment history, history of trauma), and the needs of the individual patient. Treatment may also vary across specific patient characteristics such as sex, race, ethnicity, and socio-economic status. Some individuals may require in-patient care while others are able to manage their BPD with psychotherapy, medication, or a combination of both.
- A search of the literature search did not identify systematic reviews that addressed the comparative effectiveness of treatments for BPD. However, the search did identify a large volume of recently published studies that focus on the use of pharmacologic and non-pharmacologic interventions for the treatment of BPD. Based on our search results, an AHRQ systematic review is feasible and would not be duplicative.
- An AHRQ systematic review also has the potential for impact because of high interest from the nominator. An AHRQ product that presents a comprehensive review and assessment of the available evidence could be used to inform clinical guideline development.

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